

07/15/03
17114 U.S. PTO

Docket No. 17566 (AP)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

21707 U.S. PTO
10/621053
07/15/03

Applicant: PETER BAKHIT, et al.)
Serial No.: Pending)
Filed: Herewith)
For: OPHTHALMIC COMPOSITIONS)
COMPRISING TREFOIL FACTOR FAMILY)
PEPTIDES)
Irvine, California)

NON-PROVISIONAL PATENT APPLICATION TRANSMITTAL LETTER

Mail Stop: Patent Application
Commissioner for Patents
P.O. Box 1450
Alexander, VA 22313-1450

Sir/Madam:

Enclosed herewith are the following documents:

- (x) Transmittal Letter – 3 pgs
- (x) Specification 20 pages total) consisting of 53 Claims (5 pgs) Abstract (1 pg)
- () Drawings (0 sheets)
- (x) Declaration/Power of Attorney
- (x) Assignment with Recordation Cover Sheet
- () Information Disclosure Statement with cited art
- (x) Return/postage paid Postcard
- (x) Express Mail Certificate No. EV295683149US

Dated: _____

7/15/03

Brent A. Johnson
BRENT A. JOHNSON
Registration No. 51,851

CERTIFICATE OF EXPRESS MAIL UNDER 37 C.F.R. §1.10

I hereby certify that the above-identified documents are being deposited with the United States Postal Service on **July 15, 2003** in an envelope as "Express Mail Post Office To Addressee" mailing label number EV295683149US with sufficient postage for Express Mail addressed to MS: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: _____

July 15, 2003

Susan Bartholomew
Name of person mailing paper

Susan Bartholomew
Signature of person mailing paper

NEW APPLICATION TRANSMITTAL FORM

To the Assistant Commissioner for Patents:

This is a Request for filing a NON-PROVISIONAL patent application under 37 CFR 1.53(b) entitled **OPHTHALMIC COMPOSITIONS COMPRISING TREFOIL FACTOR FAMILY PEPTIDES** by the following named inventor:

1.	First Name: PETER	Initial G.	Last Name BAKHIT	
	City HUNTINGTON BEACH	State or Foreign Country CALIFORNIA	Country Of Citizenship U.S.A.	
	Post Office Address 21661 BROOKHURST #144	City HUNTINGTON BEACH	State or Country CALIFORNIA	Zip Code 92646
2.	First Name: OREST	Initial	Last Name OLEJNIK	
	City 5 ADDINGTON PLACE	State or Foreign Country CALIFORNIA	Country of Citizenship U.S.A.	
	Post Office Address 5 ADDINGTON PLACE	City COTO DE CAZA	State or Country CALIFORNIA	Zip Code 92679
3.	First Name: RICHARD	Initial	Last Name GRAHAM	
	City IRVINE	State or Foreign Country CALIFORNIA	Country of Citizenship U.S.A.	
	Post Office Address 5066 BALSAWOOD	City IRVINE	State or Country CALIFORNIA	Zip Code 91612

(X) The Commissioner is hereby authorized to use Deposit Account Number 01-0885 for the payment of any extension fees incurred during the prosecution of this application.

(X) Enclosed is a specification of 20 pages, 53 claims (5 pages) and an abstract (1 page).

Oath or Declaration

(X) Enclosed is a fully executed oath or declaration.

() Enclosed is an unsigned oath or declaration.

(X) A self-addressed return postcard is enclosed for verification of receipt.

(X) The filing fee is calculated below:

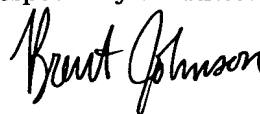
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
Basic Fee (Large entity)			\$750.00	\$750.00
Total Claims	53 minus 20 =	-33-	\$18.00	\$594.00
Independent Claims	4 minus 3 =	-1-	\$84.00	\$18.00
If application contains any multiple dependent claims, then add			\$280.00	\$.00
TOTAL FILING FEE				\$1362..00

- (X) The Commissioner is hereby authorized to charge the filing fee and excess claim fees (including multiple dependent claim fee) as stated above to Deposit Account No. 01-0885. If this amount is incorrect, or for payment of any other fees that may be incurred as a result of this communication please use said Deposit Account. A duplicate copy of this sheet is enclosed for that purpose.
- (X) An Assignment with the Recordation Cover Sheet, bestowing all interest in this application to Allergan, Inc., is enclosed.
- () New drawing(s) are enclosed ___ sheets.
- () A Statement Pursuant to 37 CFR §1.821(f) and a labeled diskette containing the computer readable sequence listing is enclosed.
- () A Statement Pursuant to 37 CFR §1.821(e), stating that the paper copy and the computer readable form are identical is filed herewith.
- () A properly labeled computer readable form of the Sequence Listing accompanies this Application.
- (X) The Power of Attorney in this application is to Brent A. Johnson, Registration Number 51,851.
- (X) The Power of Attorney appears in the Combined Declaration and Power of Attorney, filed herewith.
- () A copy of the Request for Extension of Time filed in the prior application is enclosed.

Please address all future communications to:

BRENT A. JOHNSON
 Registration No. 51,851
 ALLERGAN, INC.
 2525 Dupont Drive, T2-7H
 Irvine, CA 92612
 Tel: 714-246-4348 Fax: 714-246-4249

Respectfully submitted,



Date: 7/15/03

Brent A. Johnson
 Registration No. 51,851
 Patent Agent of Record